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FACSIMILE TRANSMITTAL SHEET

TO: Examiner Etienne Pierre Leroux
Art Unit 2161

FIRM/COMPANY: Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

FACSIMILE NUMBER: 571.273.4022

**CONFIRMATION
TELEPHONE:** 571.272.4022

FROM: Gary R. Maze

DIRECT DIAL: 713.402.3917

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MESSAGE: Application No. 10/021,521, filed 10/29/2001

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PTO/SB/21 (09-06)

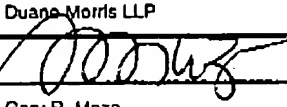
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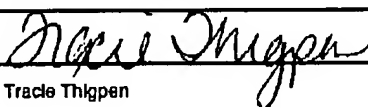
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/021,521
	Filing Date	10/29/2001
	First Named Inventor	Gary R. Maze
	Art Unit	2161
	Examiner Name	Etienne Pierre Laroux
Total Number of Pages in This Submission	Attorney Docket Number	E4507-2

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.63	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Filed herewith is the Amendment in Response to Examiner interview.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Duane Morris LLP		
Signature			
Printed name	Gary R. Maze		
Date	12/05/2006	Reg. No.	42,851

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Maze, et al.	§	Group Art Unit:	2161
Serial No:	10/021,521	§		
		§	Examiner:	LeRoux, E.
Filed:	October 29, 2001	§		
		§	Attorney Docket:	BS0001
For:	System And Method For The	§		
	Management Of Distributed	§		
	Personalized Information	§		

AMENDMENT IN RESPONSE TO EXAMINER INTERVIEW

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In further response to the final Office Action dated September 08, 2006 and after an interview with the Patent Examiner, please amend the above-identified application as shown below. Applicant wishes to thank the Patent Examiner for his time and suggestions.